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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Att rn y D ck t Numb r		J-3789		
		rst Nam d Invento	James G. Chaus		Chaussee	
		COMPLETE IF KNOWN				
		oplication Number	/		,	
Declaration Submitted OR Submitted after Initial		ling Date	Aug	ust 19	, 2003	
		t Unit				
with Initial Filing (surcharg (37 CFR 1.16 (required)	(e))	kaminer Name				
As the below named inventor, I hereby declare that:	•	·		_		
My residence, mailing address, and citizenship are as st	ated below nex	kt to my name.				
I believe I am the original and first inventor of the subject	t matter which	is claimed and for whi	ich a pa	tent is sou	ght on the invention entitled:	
Skin Preparation Composition						
(Tithe the specification of which	e of the Inventi	on)				
is attached hereto						
OR		7				
was filed on (MM/DD/YYYY) as United States Application Number or PCT International						
Application Number and was	s amended on	(MM/DD/YYYY)			(if applicable).	
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.						
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.						
Prior Foreign Application Number(s) Country	F	oreign Filing Date (MM/DD/YYYY)		iority Claimed	Certified Copy Attached? YES NO	
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			Ì			
Additional foreign application numbers are listed on	a supplement	al priority data sheet F	TO/SB	/02B attach	ned hereto:	

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

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Name David J. Houser				
Address S.C. Johnson & Son, Inc. 1525 Howe Street	et			
City Racine		State WI	ZIP 53403	
Country USA Tele	ephone (262) 26	60-2206	Fax (262) 260-4253	
I hereby declare that all statements made herein of my or are believed to be true; and further that these statement made are punishable by fine or imprisonment, or both, ur validity of the application or any patent issued thereon.	ts were made with	n the knowledge that willtul tals	se statements and the like so	
NAME OF SOLE OR FIRST INVENTOR :	A petition h	as been filed for this unsi	gned inventor	
Given Name (first and middle [if any]) James G. Family Name or Surname Chaussee				
Inventor's Signature Date 8-15-23				
Residence: City Racine	State WI	Country USA	Citizenship USA	
Mailing Address 3424 Ascot Drive				
O'the Province	State WI	ZIP 53406	Country USA	
NAME OF SECOND INVENTOR:	<u> </u>	s been filed for this unsign		
NAME OF SECOND INVENTOR.	71 poulion na	o soon mee for the energy		
Given Name (first and middle [if any]) Debra A.		Family Name or Surname Strasser		
Inventor's Signature Welra Stasser Date 8/15/			Date 8/15/03	
Residence: City Franksville	State WI	Country USA	Citizenship USA	
Mailing Address 4544 2 Mile Road				
7.777 2 Millo Roud				
City Franksville	State WI	ZIP 53126	Country USA	
	pplemental Additi	onal Inventor(s) sheet(s) PTO/S	B/02A attached hereto.	

Please type a plus sign (+) inside this box +

PTO/SB/81 (02-01)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	August 19, 2003
First Named Inventor	James G. Chaussee
Title	Skin Preparation Composition
Group Art Unit	
Examiner Name	
Attorney Docket Number	J-3789

Practitioners at Customer Number 28165	I hereby appo	int:				
Name Registration Number 30,195	OR		28165		Number Bar Code	
William F.M. Cracken 30,195			-	Registra	ation Number	
Anthony G. Volini 48,016 Matthew M. Fannin 51,268 Manisha C. Wulf 41,665 Erin J. Fox 52,261 as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Practitioners at Customer Number. OR Firm or Individual Name Address Address City State I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SBI96). SIGNATURE of Applicant or Assignee of Record Name Debra A. Strasser Signature Date Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.			1	i i i i i i i i i i i i i i i i i i i		
Matthew M. Fannin Manisha C. Wulf Manisha C. Wulf Brin J. Fox Si.261 as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Practitioners at Customer Number. OR Firm or Individual Name Address City State Zip Country Telephone I am the: Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Debra A. Strasser Signature Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.						
Address Address Address City Country Telephone I am the: Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Debra A. Strasser Signature Date Manisha C. Wulf Erin J. Fox 52.261 Flore Customer Number Bar Code Label here Place Customer Number Bar Code Label				ļ		
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Practitioners at Customer Number OR Firm or Individual Name Address Address City State Zip Country Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Debra A. Strasser Signature Aleka H. Manaac Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	OR					
OR Firm or Individual Name Address Address City State Zip Country Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Debra A. Strasser Signature All Manual A. Atturned Date 8/15/03 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Practitioner	s at Customer Number				
Individual Name Address Address City State Zip Country Telephone Fax I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Debra A. Strasser Signature All A Atlantary Date 8/15/03 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	OR			L	Label Here	
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City Country Telephone Fax I am the: Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Debra A. Strasser Signature Date 8/15/83 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Address					
Telephone I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Debra A. Strasser Signature Date 8/15/03 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Address					
Telephone I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Debra A. Strasser Signature Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	City			State	Zip	
Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Debra A. Strasser Signature Alana A. Attasser Date 8/15/03 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Country					
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Debra A. Strasser Signature Date 8/15/03 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Telephone			Fax		
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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Debra A. Strasser Signature Date Date 8/15/03 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.						
Name Debra A. Strasser Signature Date Date 8 / 15/03 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.						
Signature Date 8 / 15/03 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	SIGNATURE of Applicant or Assignee of Record					
Date 8 / 15/03 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Name	Debra A. Strasser				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Signature Dela D. Strasser					
forms if more than one signature is required, see below*.	Date 8/15/03					
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	Total offorms are submitted.					

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Application Number	
Filing Date	August 19, 2003
First Named Inventor	James G. Chaussee
Title	Skin Preparation Composition
Group Art Unit	
Examiner Name	
Attorney Docket Number	J-3789

I hereby	appoint:						
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		Name		Pogi	stration Number		
		William E. McCracken		Keyi	stration Number 30.195		
		J. William Frank, III			25,626		
		Anthony G. Volini			48,016		
		Matthew M. Fannin			51,268		
		Kelly J. Smith Erin J. Fox	····		53,611 52,261		
	771	Lilli J. POX			32,261		
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✗ Ap	plicant/Invente	or.					
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).							
SIGNATURE of Applicant or Assignee of Record							
Name James G. Chaussee							
Signature (Imas 7) Univoses							
Date 8-15-23							
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.							
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